

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>7-14-05</u>		2 Serial/Patent # <u>10/1533218</u>	
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED
			6 AMOUNT
<input checked="" type="checkbox"/>	Filing		\$ 100.00
	Amendment		\$
	Extension of Time		\$
	Notice of Appeal/Appeal		\$
	Petition		\$
	Issue		\$
	Cert of Correction/Terminal Disc.		\$
	Maintenance		\$
	Assignment		\$
	Other		\$
		7 TOTAL AMOUNT OF REFUND	\$100.00
		8 TO BE REFUNDED BY:	
10 REASON:		Treasury Check	
	Overpayment	Credit Deposit A/C #:	
	Duplicate Payment	9	
No Fee Due (Explanation): <i>Fee Code Correction</i>			
11 REFUND REQUESTED BY:			
TYPED/PRINTED NAME: <u>BARBARA CAMPBELL</u>		TITLE: _____	
SIGNATURE: <u>BAC</u>		PHONE: <u>703 359-9140</u>	
OFFICE: <u>PCT/DO/EO</u>		EXT 217	
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****			
APPROVED: _____		DATE: _____	
		Adjustment date: 07/14/2005 BCAMPBEL 05/09/2005 SNAJARRO 00000045 10533218 03 FC:1632 -500.00 DP	

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**